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CONFIRMATION NO. 5061

<b>SERIAL NUMBER</b> 10/772,076	<b>FILING OR 371(c) DATE</b> 02/03/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1632	<b>ATTORNEY DOCKET NO.</b> 18989-032	
<b>APPLICANTS</b> Howard F. Bunn, Auburndale, MA; Jianxin Xie, Waltham, MA; Hao Zhu, Bedford, MA;					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/444,784 02/03/2003 <b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/08/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Marcia S. Nolle</i> <i>MS</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 59	<b>INDEPENDENT CLAIMS</b> 18
<b>ADDRESS</b> 30623					
<b>TITLE</b> Compositions and methods of treating diabetes					
<b>FILING FEE RECEIVED</b> 1446	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		